STATEMENT OF CLAIMANT FORM FOR

OTHER USES¹ AMENDMENT

	AND ALL AND CASE OF THE PARTY O	
W W W W W		i
		ì
File No.	30.	ġ
		į
		Š
	ed:	ì
	ec.	k
		Ó
		Š
WFN		2
		Š
		м

For Departmental Use Only

SUPERIOR COURT OF APACHE COUNTY

1.	Claimant	Name:					
		Address:					
			Telephone				
2.	Basis of (Claim: Appropriation Right acquired prior to June 12, Registry No	1919. 1974 Water Rights Registration Act				
	B. 🗆	Appropriation Right acquired after June 12, 1919. Application No, Permit No, or Certificate of Water Right No,					
	c. 🗆		date and case no.				
	D. 🗆 E. 🗆	Right to withdraw groundwater. Grandfathered Other, describe:	Right No.				
3.	Claimed I	Priority Date:/(month/day/yea	ar)				
4.	Use: A. B. C. D.	Municipal E	Recreation, Fish & Wildlife Other, describe:				
5.	Source of A.	Stream: nameSpring: name	_, tributary to _, tributary to _, tributary to				
6.	_	acription of the Point of Diversion: (attach ad	iditional sheet if required),TownshipN/S, RangeE/W				
7.	*	re Irrigation, Domestic or Stockpond Uses al	iso supplied from the Point of Diversion,				
8.	Means of A.	Diversion: Instream pump. Gravity flow into a ditch, canal or pipeline. Well: Arizona Department of Water Resou	urces Well Registration No. 55				
1 5	See Instruct	ions for explanation of uses in this category					

	ance: canal or pipeline. If the means please give name and addres				
B. Other,	describe:				
	other than point of diversion	: (attach additional sheet i	f required)		
Legal Subdivisio	n		Township N/s	Range	•
1. Claimed Right:		☐ cubic-feet per second		•	
	e of Water Use:	☐ Arizona miner's inches			
C. Storage Right	· ·	acre-feet		·	
	ohs, maps or sketches neces and means of conveyance.	sary to show the point of	diversion, sto	rage resevo	ir(s
4. Should it be ned representative, as specified person?	etion: Signature of Claimant essary for a representative or there any special instruction	f the Department to contains regarding time of day o	ct you as the or r address to all	claimant or d in locating	you th
(attach additional	sheet if required)				_
16. Mail form(s) to:	AZ DEPT OF WATER RESOURCES ADJUDICATIONS PO BOX 36020 PHOENIX AZ 85067-6020)			
17. Notarized Stater	•				
i (We),the claimant(s) na	•	ertify under penalty of perjui my (our) knowledge and b	ry, that the infor elief true, corre	mation conta ct and comp	lete
i (We),the claimant(s) na	med in this claim, do hereby co	ertify under penalty of perjui my (our) knowledge and b	ry, that the infor elief true, corre	mation conta ct and comp	ine
the claimant(s) na and statements n (seal)	med in this claim, do hereby co	my (our) knowledge and b	ry, that the infor elief true, corre	mation contact and comp	ine